

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Special Operations Speaks PAC - SOS PAC

ADDRESS (number and street) ▼

103 Pamlico Place

☐ Check if different than previously reported. (ACC)

Chocowinity

NC

27817

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00524280

3. IS THIS  
REPORT☐ NEW  
(N)

OR

☒ AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

01

2013

12

31

2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dan Backer

Signature of Treasurer

Dan Backer

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

11

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Special Operations Speaks PAC - SOS PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		<span style="border: 1px solid black; padding: 2px;">42827.77</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">34663.31</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">196230.76</span>	<span style="border: 1px solid black; padding: 2px;">296381.52</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">230894.07</span>	<span style="border: 1px solid black; padding: 2px;">339209.29</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">155119.44</span>	<span style="border: 1px solid black; padding: 2px;">263434.66</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">75774.63</span>	<span style="border: 1px solid black; padding: 2px;">75774.63</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Special Operations Speaks PAC - SOS PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 / 01 / 2013

To:

M M / D D / Y Y Y Y  
12 / 31 / 2013
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2100.00

4300.00

(ii) Unitemized .....

8792.00

16074.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

10892.00

20374.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

1500.00

1500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

12392.00

21874.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

183838.76

274507.52

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

196230.76

296381.52

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

196230.76

296381.52

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	15013.21	35135.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15013.21	35135.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5200.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	990.00	1375.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	990.00	1375.00
29. Other Disbursements .....	139116.23	221723.92
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	155119.44	263434.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	155119.44	263434.66

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12392.00	21874.00
34. Total Contribution Refunds (from Line 28(d)) .....	990.00	1375.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11402.00	20499.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	15013.21	35135.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	15013.21	35135.74

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: F3XA  
Transaction ID :

Amended to include previously refunded contributions not reported.

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 92  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Ciaccio**

Mailing Address 3506 Highway 6  
Ste 172

City State Zip Code  
Surgar Land TX 77478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 02 / 2013

**Transaction ID : SA11AI.21010**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Stephen J. Elson**

Mailing Address 5350 East Deer Valley Drive  
Apt. 3400

City State Zip Code  
Phoenix AZ 85054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 30 / 2013

**Transaction ID : SA11AI.20890**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Robert Gehring**

Mailing Address 183 Sunset View Dr

City State Zip Code  
Doylestown PA 18901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

n/a

n/a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 04 / 2013

**Transaction ID : SA11AI.20910**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 92  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Robert Gehring**

Mailing Address 183 Sunset View Dr

City State Zip Code  
Doylestown PA 18901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

n/a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 04 / 2013

Transaction ID : SA11AI.21017

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. William Gregory**

Mailing Address 22 La Semilla Road

City State Zip Code  
Taos NM 87571-6931

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 21 / 2013

Transaction ID : SA11AI.20860

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mark Hanson**

Mailing Address 4261 Ashley Ave

City State Zip Code  
Pahrump NV 89061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 17 / 2013

Transaction ID : SA11AI.20968

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

425.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 92

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Donald Klein**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 18 / 2013

**Transaction ID : SA11AI.21029**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Paul F. Lamay**

Mailing Address 4439 Fair Stone Dr.  
#201

City State Zip Code  
Fairfax VA 22033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fairfax County Public Schools

Occupation

Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 10 / 2013

**Transaction ID : SA11AI.21134**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Charles Neild**

Mailing Address 3415 Locust Hill Rd

City State Zip Code  
Taylors SC 29687-6044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 04 / 2013

**Transaction ID : SA11AI.21013**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

725.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 92

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Sharon S Riihimaki**

Mailing Address 717 Laurel Ave

City

Glendora

State

CA

Zip Code

91741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 18 / 2013

Transaction ID : SA11AI.21070

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

2100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 92

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

## **A. THE TEA PARTY LEADERSHIP FUND**

Mailing Address 203 SOUTH UNION STREET  
SUITE 300

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00520825

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 07 2013

**Transaction ID : SA11C.28900**

Amount of Each Receipt this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Clayton D Anderson**

Mailing Address 525 N 4200 E

City State Zip Code  
Rigby ID 83442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Flow tester (gas & oil industry )

Opsco energy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 08 2013

**Transaction ID : SA17.21187**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Walter Anderson**

Mailing Address 4280 Sun Valley Blvd

City State Zip Code  
East Point GA 30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 18 2013

**Transaction ID : SA17.21398**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Walter Anderson**

Mailing Address 4280 Sun Valley Blvd

City State Zip Code  
East Point GA 30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 23 2013

**Transaction ID : SA17.23838**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Walter Anderson**

Mailing Address 4280 Sun Valley Blvd

City State Zip Code  
 East Point GA 30344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA17.26591**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Edward Baergen**

Mailing Address 285 Sigma Drive

City State Zip Code  
 Harwood MD 20776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 18 / 2013

**Transaction ID : SA17.21405**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Edward Baergen**

Mailing Address 285 Sigma Drive

City State Zip Code  
 Harwood MD 20776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 22 / 2013

**Transaction ID : SA17.26107**

Amount of Each Receipt this Period

100.00

retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Anthony Bartlett**

Mailing Address 164 Ashland Pt.

City State Zip Code  
Hendersonville TN 37075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2013

**Transaction ID : SA17.26544**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Margaret Barton**

Mailing Address 209 East Lake Shore Dr. Unit 9W

City State Zip Code  
Chicago IL 60611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Home

Home

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : SA17.25678**

Amount of Each Receipt this Period

100.00

Home

Full Name (Last, First, Middle Initial)

**C. Jo Ann Baughman**

Mailing Address PO Box 1269

City State Zip Code  
Philomatyh OR 97370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 16 / 2013

**Transaction ID : SA17.28898**

Amount of Each Receipt this Period

66.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

416.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Jo Ann Baughman**

Mailing Address PO Box 1269

City

Philomatyh

State

OR

Zip Code

97370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 18 / 2013

**Transaction ID : SA17.25667**

Amount of Each Receipt this Period

68.00

retired

Full Name (Last, First, Middle Initial)

**B. Jo Ann Baughman**

Mailing Address PO Box 1269

City

Philomatyh

State

OR

Zip Code

97370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 07 / 2013

**Transaction ID : SA17.26025**

Amount of Each Receipt this Period

47.00

retired

Full Name (Last, First, Middle Initial)

**C. Jacqueline Beeler**

Mailing Address 3012 Tule Avenue #3233

City

Fort Worth

State

TX

Zip Code

76116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician assistant

Occupation

Texas Health Physicians Group

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 12 / 2013

**Transaction ID : SA17.23573**

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Jacqueline Beeler**

Mailing Address 3012 Tule Avenue #3233

City State Zip Code  
Fort Worth TX 76116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician assistant

Occupation

Texas Health Physicians Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 12 / 2013

**Transaction ID : SA17.24723**

Amount of Each Receipt this Period

25.00

physician assistant

Full Name (Last, First, Middle Initial)

**B. Jacqueline Beeler**

Mailing Address 3012 Tule Avenue #3233

City State Zip Code  
Fort Worth TX 76116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician assistant

Occupation

Texas Health Physicians Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 08 / 2013

**Transaction ID : SA17.26336**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Jacqueline Beeler**

Mailing Address 3012 Tule Avenue #3233

City State Zip Code  
Fort Worth TX 76116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician assistant

Occupation

Texas Health Physicians Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 15 / 2013

**Transaction ID : SA17.25253**

Amount of Each Receipt this Period

25.00

physician assistant

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Jacqueline Beeler**

Mailing Address 3012 Tule Avenue #3233

City

Fort Worth

State

TX

Zip Code

76116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician assistant

Occupation

Texas Health Physicians Group

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

11 / 12 / 2013

**Transaction ID : SA17.25538**

Amount of Each Receipt this Period

25.00

physician assistant

Full Name (Last, First, Middle Initial)

**B. Jacqueline Beeler**

Mailing Address 3012 Tule Avenue #3233

City

Fort Worth

State

TX

Zip Code

76116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician assistant

Occupation

Texas Health Physicians Group

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

12 / 12 / 2013

**Transaction ID : SA17.26072**

Amount of Each Receipt this Period

25.00

physician assistant

Full Name (Last, First, Middle Initial)

**C. David Allen Bego**

Mailing Address P.O. Box 501796

City

Indianapolis

State

IN

Zip Code

46250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

07 / 22 / 2013

**Transaction ID : SA17.22496**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. David Allen Bego**

Mailing Address P.O. Box 501796

City  
Indianapolis

State  
IN

Zip Code  
46250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2013

**Transaction ID : SA17.26459**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Marguerite Belec**

Mailing Address 118 Cranbrook Court

City  
Ingram

State  
TX

Zip Code  
78025-4400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 07 / 2013

**Transaction ID : SA17.23417**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Marguerite Belec**

Mailing Address 118 Cranbrook Court

City  
Ingram

State  
TX

Zip Code  
78025-4400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 30 / 2013

**Transaction ID : SA17.23958**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

## **A. Marguerite Belec**

Mailing Address 118 Cranbrook Court

City State Zip Code  
 Ingram TX 78025-4400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 30 / 2013

**Transaction ID : SA17.24977**

Amount of Each Receipt this Period

50.00

Retired

Full Name (Last, First, Middle Initial)

## **B. Joyce Boghosian**

Mailing Address 534 Webster Drive

City State Zip Code  
 Martinez CA 94553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

John Muir Health

Clinical Laboratory Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 11 / 2013

**Transaction ID : SA17.28501**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Joyce Boghosian**

Mailing Address 534 Webster Drive

City State Zip Code  
 Martinez CA 94553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

John Muir Health

Clinical Laboratory Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : SA17.25427**

Amount of Each Receipt this Period

25.00

Clinical Laboratory Scientist

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph c Bongiovanni**

Mailing Address 107 millsford dr

City

Madison

State

AL

Zip Code

35758

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2013

**Transaction ID : SA17.27567**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. TJ Boyd**

Mailing Address PO Box 11351

City

Midland

State

TX

Zip Code

79702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2013

**Transaction ID : SA17.28096**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Michael Butigian**

Mailing Address 58-75 57th Road

City

Maspeth

State

NY

Zip Code

11378

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2013

**Transaction ID : SA17.28856**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

600.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Diane Carkhuff**

Mailing Address 915 N. Pine Avenue

City State Zip Code  
 Midwest City OK 73130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 19 / 2013

**Transaction ID : SA17.25674**

Amount of Each Receipt this Period

250.00

Retired

Full Name (Last, First, Middle Initial)

**B. Patricia Anne Chalue**

Mailing Address 5075 Lily Street Place

City State Zip Code  
 Pinellas Park FL 33782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bookkeeper/Office Manager

Occupation

R2J Chemical Services, Inc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 07 / 2013

**Transaction ID : SA17.23555**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Patricia Anne Chalue**

Mailing Address 5075 Lily Street Place

City State Zip Code  
 Pinellas Park FL 33782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bookkeeper/Office Manager

Occupation

R2J Chemical Services, Inc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 09 / 2013

**Transaction ID : SA17.24720**

Amount of Each Receipt this Period

25.00

Bookkeeper/Office Manager

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Patricia Anne Chalue**

Mailing Address 5075 Lily Street Place

City

Pinellas Park

State

FL

Zip Code

33782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bookkeeper/Office Manager

Occupation

R2J Chemical Services, Inc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 07 / 2013

Transaction ID : SA17.25121

Amount of Each Receipt this Period

25.00

Bookkeeper/Office Manager

Full Name (Last, First, Middle Initial)

**B. Patricia Anne Chalue**

Mailing Address 5075 Lily Street Place

City

Pinellas Park

State

FL

Zip Code

33782

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bookkeeper/Office Manager

Occupation

R2J Chemical Services, Inc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 07 / 2013

Transaction ID : SA17.25507

Amount of Each Receipt this Period

25.00

Bookkeeper/Office Manager

Full Name (Last, First, Middle Initial)

**C. James Clark**

Mailing Address 4284 Deercrest Drive

City

Valdosta

State

GA

Zip Code

31602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / 15 / 2013

Transaction ID : SA17.25586

Amount of Each Receipt this Period

25.00

Retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. James Clark**

Mailing Address 4284 Deercrest Drive

City State Zip Code  
 Valdosta GA 31602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 06 / 2013

**Transaction ID : SA17.25974**

Amount of Each Receipt this Period

250.00

Retired

Full Name (Last, First, Middle Initial)

**B. Alan Coffey**

Mailing Address 13607 N. 18th Place

City State Zip Code  
 Phoenix AZ 85022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 10 / 2013

**Transaction ID : SA17.27461**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. James Cool**

Mailing Address PO Box 849

City State Zip Code  
 Newport WA 99156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Dentist/patriot

Me

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 27 / 2013

**Transaction ID : SA17.23928**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

775.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. James Crowson**

Mailing Address 5611 Jordan Rd

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 09 / 2013

**Transaction ID : SA17.26368**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. henry cubberly**

Mailing Address 119 poinsettia dr

City

leesburg

State

FL

Zip Code

34788

FEC ID number of contributing  
federal political committee.

C

Name of Employer

none

Occupation

retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 03 / 2013

**Transaction ID : SA17.24108**

Amount of Each Receipt this Period

25.00

retired

Full Name (Last, First, Middle Initial)

**C. Mae E Dawson**

Mailing Address P.O. Box 157

City

Fulton

State

TX

Zip Code

78358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Garbage service

Occupation

The Bag Lady

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / 21 / 2013

**Transaction ID : SA17.25687**

Amount of Each Receipt this Period

25.00

Garbage service

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Mae E Dawson**

Mailing Address P.O. Box 157

City State Zip Code  
 Fulton TX 78358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Garbage service

The Bag Lady

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : SA17.25783**

Amount of Each Receipt this Period

250.00

Garbage service

Full Name (Last, First, Middle Initial)

**B. Eugene P. Deatrick**

Mailing Address 1013 E. Taylor Run Pkwy

City State Zip Code  
 Alexandria, VA 22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA17.26397**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. James R Diefenthal**

Mailing Address 28 Falcon Drive

City State Zip Code  
 Mandeville LA 70471-2952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CEO

Diefenthal Holdings, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

**Transaction ID : SA17.22498**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

625.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Robert D Dingeman**

Mailing Address 664 Aspen Heights Drive

City

Fairbanks

State

AK

Zip Code

99712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2013

**Transaction ID : SA17.26320**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. David Elliott**

Mailing Address PO Box 757

City

Kaufman

State

TX

Zip Code

75142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retireds

Occupation

self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 23 / 2013

**Transaction ID : SA17.23846**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Walter Emerson**

Mailing Address 4255 Brendan Lane

City

North Olmsted

State

OH

Zip Code

44070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 13 / 2013

**Transaction ID : SA17.28872**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Lawrence T Eschelmann**

Mailing Address 3585 Cherokee Dr S

City  
Salem

State  
NY

Zip Code  
97302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 09 / 2013

**Transaction ID : SA17.26026**

Amount of Each Receipt this Period

100.00

Physician

Full Name (Last, First, Middle Initial)

**B. Mary Joyceann Evans**

Mailing Address 542 Canoe Point  
Delray Beach

City

Delray Beach

State

FL

Zip Code

33444

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 20 / 2013

**Transaction ID : SA17.23676**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Edward Joseph Gann**

Mailing Address 1504 Sawyer Avenue

City

Manasquan

State

NJ

Zip Code

08736-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Registered Nurse

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2013

**Transaction ID : SA17.27205**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Edward Joseph Gann**

Mailing Address 1504 Sawyer Avenue

City

Manasquan

State

NJ

Zip Code

08736-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Registered Nurse

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 05 / 2013

Transaction ID : SA17.25925

Amount of Each Receipt this Period

25.00

Registered Nurse

Full Name (Last, First, Middle Initial)

**B. LAURENCIO ROBERTO GARZA**

Mailing Address 6509 MONMOUTH MEWS

City

MONTGOMERY

State

AL

Zip Code

36117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 06 / 2013

Transaction ID : SA17.24364

Amount of Each Receipt this Period

50.00

NONE

Full Name (Last, First, Middle Initial)

**C. Robert Gehring**

Mailing Address 183 Sunset View Dr

City

Doylestown

State

PA

Zip Code

18901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

n/a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 21 / 2013

Transaction ID : SA17.24902

Amount of Each Receipt this Period

50.00

n/a

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Robert Gehring**

Mailing Address 183 Sunset View Dr

City State Zip Code  
 Doylestown PA 18901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

n/a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA17.26504**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Robert Gehring**

Mailing Address 183 Sunset View Dr

City State Zip Code  
 Doylestown PA 18901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

n/a

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 22 / 2013

**Transaction ID : SA17.25688**

Amount of Each Receipt this Period

25.00

n/a

Full Name (Last, First, Middle Initial)

**C. Todd Gelston**

Mailing Address 50 Bogel Road

City State Zip Code  
 East Haddam CT 06423

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : SA17.25923**

Amount of Each Receipt this Period

100.00

Retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 92

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Katharine T Gray**

Mailing Address 9808 Kingsbridge Rd

City State Zip Code  
 Richmond VA 23238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 18 / 2013

**Transaction ID : SA17.21406**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Katharine T Gray**

Mailing Address 9808 Kingsbridge Rd

City State Zip Code  
 Richmond VA 23238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : SA17.25635**

Amount of Each Receipt this Period

250.00

homemaker

Full Name (Last, First, Middle Initial)

**C. Bob Greenspan**

Mailing Address 21376 Carabela

City State Zip Code  
 Mission Viejo CA 92692

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 23 / 2013

**Transaction ID : SA17.23844**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

900.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

## **A. Bob Greenspan**

Mailing Address 21376 Carabela

City State Zip Code  
Mission Viejo CA 92692

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2013

**Transaction ID : SA17.24554**

Amount of Each Receipt this Period

100.00

Attorney

Full Name (Last, First, Middle Initial)

## **B. Stan Guillaume**

Mailing Address 3100 NE 48th Street  
Apt 105

City State Zip Code  
Fort Lauderdale FL 33308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2013

**Transaction ID : SA17.26521**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Glen Richard Haas**

Mailing Address 880 Open Sky Court

City State Zip Code  
Allen TX 75013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Engineer

Aragio Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : SA17.25908**

Amount of Each Receipt this Period

50.00

e

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

## **A. Gaylord Herman**

Mailing Address 3705 Arctic Blvd #1453

City State Zip Code  
 Anchorage AK 99503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 11 / 2013

**Transaction ID : SA17.25469**

Amount of Each Receipt this Period

100.00

DAV

Full Name (Last, First, Middle Initial)

## **B. Walter Hetzler**

Mailing Address 5527 Topaz St. SE

City State Zip Code  
 Lacey WA 98513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA17.26704**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Walter Hetzler**

Mailing Address 5527 Topaz St. SE

City State Zip Code  
 Lacey WA 98513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA17.26705**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Walter Hetzler**

Mailing Address 5527 Topaz St. SE

City State Zip Code  
 Lacey WA 98513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 09 2013

**Transaction ID : SA17.26706**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Walter Hetzler**

Mailing Address 5527 Topaz St. SE

City State Zip Code  
 Lacey WA 98513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 09 2013

**Transaction ID : SA17.26707**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Thomas O. Hicks**

Mailing Address 10000 hollow way

City State Zip Code  
 Dallas TX 75229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 06 2013

**Transaction ID : SA17.26004**

Amount of Each Receipt this Period

1000.00

Investments

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph Holt**

Mailing Address PSC 303 Box 31  
USFK J633 OPS

City State Zip Code  
APO AP 96204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NGIS

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 02 / 2013

**Transaction ID : SA17.24980**

Amount of Each Receipt this Period

250.00

Tactical SATCOM FSR

Full Name (Last, First, Middle Initial)

**B. James Joseph Holten**

Mailing Address 4003 Chestnut Oak Dr

City State Zip Code  
Smithton IL 62285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Holten Meat Inc

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 23 / 2013

**Transaction ID : SA17.23845**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. James Joseph Holten**

Mailing Address 4003 Chestnut Oak Dr

City State Zip Code  
Smithton IL 62285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Holten Meat Inc

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : SA17.25604**

Amount of Each Receipt this Period

25.00

Retird

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

525.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. James Joseph Holten**

Mailing Address 4003 Chestnut Oak Dr

City State Zip Code  
 Smithton IL 62285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Holten Meat Inc

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 02 2013

**Transaction ID : SA17.25832**

Amount of Each Receipt this Period

100.00

RETIRED

Full Name (Last, First, Middle Initial)

**B. Geoffrey Hulme**

Mailing Address 9 Mountain Laurel Drive

City State Zip Code  
 Greenwich CT 06831-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Analyst

Occupation

Amici Capital LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 21 2013

**Transaction ID : SA17.23729**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Jimmy Jennings**

Mailing Address 2504 Mario Ct

City State Zip Code  
 Virginia Beach VA 23456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L-3 Communications/Unidyne

Occupation

Program Manager/COMMANDER SUBMARINE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 04 2013

**Transaction ID : SA17.25883**

Amount of Each Receipt this Period

25.00

COMSUBLANT Program Manager

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Russell Bruce Johnson**

Mailing Address 5236 southbend dr se

City  
salem

State  
OR

Zip Code  
97306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : SA17.25568**

Amount of Each Receipt this Period

100.00

small business owner

Full Name (Last, First, Middle Initial)

**B. Richard Jones**

Mailing Address 1 Little Pine Road

City

Bedford Corners

State

NY

Zip Code

10549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 12 / 2013

**Transaction ID : SA17.28584**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. William H Kastner**

Mailing Address 2346 Furman Dr

City

Charleston

State

SC

Zip Code

29414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

military

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 11 / 2013

**Transaction ID : SA17.25503**

Amount of Each Receipt this Period

50.00

retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Jim Keller**

Mailing Address 121 Cedar St.

City State Zip Code  
 San Antonio TX 78210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 05 / 2013

**Transaction ID : SA17.25899**

Amount of Each Receipt this Period

1000.00

Photographer

Full Name (Last, First, Middle Initial)

**B. Paul Kelly**

Mailing Address 34232 Bridgestone Lane

City State Zip Code  
 Bluemont VA 20135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 20 / 2013

**Transaction ID : SA17.24876**

Amount of Each Receipt this Period

250.00

installer

Full Name (Last, First, Middle Initial)

**C. Mary K Kezirian**

Mailing Address 28071 North 90th Way

City State Zip Code  
 Scottsdale AZ 85262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 11 / 2013

**Transaction ID : SA17.25184**

Amount of Each Receipt this Period

1000.00

Mother/Wife

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. JOAN KISHEL**

Mailing Address 324 Bravado Lane

City State Zip Code  
 PALM BEACH SHORES FL 33404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 11 / 2013

**Transaction ID : SA17.28062**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Charles Holden Krause**

Mailing Address 265 Old Dublin Road

City State Zip Code  
 Peterborough NH 03458-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
investment adviser

Occupation  
self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 24 / 2013

**Transaction ID : SA17.22792**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Walter Anthony Kristlibas**

Mailing Address 818 Paradise Way

City State Zip Code  
 Sarasota FL 34242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Consultant on Transportation

Atkins North America

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 23 / 2013

**Transaction ID : SA17.22726**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Paul F. Lamay**

Mailing Address 4439 Fair Stone Dr.  
#201

City State Zip Code  
Fairfax VA 22033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fairfax County Public Schools

Occupation

Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : SA17.25596**

Amount of Each Receipt this Period

50.00

Retired

Full Name (Last, First, Middle Initial)

**B. leonard long**

Mailing Address 1104 longview dr

City State Zip Code  
new bern NC 28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2013

**Transaction ID : SA17.27537**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Carl Martin**

Mailing Address 3161 W 3500 N

City State Zip Code  
Vernal UT 84078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 26 / 2013

**Transaction ID : SA17.26182**

Amount of Each Receipt this Period

210.00

retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

510.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph A. Masterson**

Mailing Address 2828 Pear Orchard Blvd

City

State

Zip Code

Crestview

FL

32539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

US Army, Retired

Colonel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 07 / 2013

**Transaction ID : SA17.24474**

Amount of Each Receipt this Period

100.00

US Army, Retired

Full Name (Last, First, Middle Initial)

**B. Joseph A. Masterson**

Mailing Address 2828 Pear Orchard Blvd

City

State

Zip Code

Crestview

FL

32539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

US Army, Retired

Colonel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 03 / 2013

**Transaction ID : SA17.25051**

Amount of Each Receipt this Period

100.00

Colonel

Full Name (Last, First, Middle Initial)

**C. Joseph A. Masterson**

Mailing Address 2828 Pear Orchard Blvd

City

State

Zip Code

Crestview

FL

32539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

US Army, Retired

Colonel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 06 / 2013

**Transaction ID : SA17.25962**

Amount of Each Receipt this Period

100.00

Colonel

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Jeannette Meier**

Mailing Address 34522 N. Scottsdale Rd

City State Zip Code  
 Scottsdale AZ 85266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 20 / 2013

**Transaction ID : SA17.21933**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Lynn C. Merkle**

Mailing Address 326 Kings Highway West

City State Zip Code  
 Haddonfield NJ 08033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 18 / 2013

**Transaction ID : SA17.21369**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**c. Lynn C. Merkle**

Mailing Address 326 Kings Highway West

City State Zip Code  
 Haddonfield NJ 08033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 03 / 2013

**Transaction ID : SA17.24132**

Amount of Each Receipt this Period

50.00

Real Estate

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Lynn C. Merkle**

Mailing Address 326 Kings Highway West

City

Haddonfield

State

NJ

Zip Code

08033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 15 / 2013

**Transaction ID : SA17.25639**

Amount of Each Receipt this Period

100.00

real estate

Full Name (Last, First, Middle Initial)

**B. Garth Merrick**

Mailing Address 101 SE 11th Ave Suite 100

City

Amarillo

State

TX

Zip Code

79101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nutrifeeds

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 09 / 2013

**Transaction ID : SA17.24559**

Amount of Each Receipt this Period

300.00

Owner

Full Name (Last, First, Middle Initial)

**C. Matthew Miller**

Mailing Address 3763 7th Road

City

Bremen

State

IN

Zip Code

46506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 10 / 2013

**Transaction ID : SA17.26889**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Alan Gene Morris**

Mailing Address 62265 Hamby Rd.

City

State

Zip Code

Bend

OR

97701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Rancher/farmer

Self

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 08 / 2013

**Transaction ID : SA17.23505**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. James Naeve**

Mailing Address 1230 Eastwick Circle

City

State

Zip Code

Murphy

TX

75094

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Engineering Manager

Cisco Systems, Inc.

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 05 / 2013

**Transaction ID : SA17.25912**

Amount of Each Receipt this Period

100.00

Engineering Manager

Full Name (Last, First, Middle Initial)

**C. Phyllis W Nicholas**

Mailing Address 40 Howard Road

City

State

Zip Code

Greenwich

CT

06831-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 15 / 2013

**Transaction ID : SA17.25594**

Amount of Each Receipt this Period

100.00

homemaker

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Sharon Nicoll**

Mailing Address 7703 Verna Way

City State Zip Code  
 Lucerne CA 95458-8593

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Univ. Calif. Berkeley Retired research scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 04 2013

**Transaction ID : SA17.24218**

Amount of Each Receipt this Period

100.00

Retired

Full Name (Last, First, Middle Initial)

**B. Sharon Nicoll**

Mailing Address 7703 Verna Way

City State Zip Code  
 Lucerne CA 95458-8593

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Univ. Calif. Berkeley Retired research scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 11 2013

**Transaction ID : SA17.28464**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Marilyn D. Nielson**

Mailing Address P O Box 3384

City State Zip Code  
 Torrance CA 90510

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 retired, investor self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 20 2013

**Transaction ID : SA17.24928**

Amount of Each Receipt this Period

100.00

retired, investor

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Mary Ann Ann Nordhauser**

Mailing Address 3615 Gurrero Drive

City State Zip Code  
Viera FL 32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2013

**Transaction ID : SA17.23213**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mary Ann Ann Nordhauser**

Mailing Address 3615 Gurrero Drive

City State Zip Code  
Viera FL 32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 28 / 2013

**Transaction ID : SA17.25341**

Amount of Each Receipt this Period

50.00

retired

Full Name (Last, First, Middle Initial)

**C. Mary Ann Ann Nordhauser**

Mailing Address 3615 Gurrero Drive

City State Zip Code  
Viera FL 32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 06 / 2013

**Transaction ID : SA17.25971**

Amount of Each Receipt this Period

50.00

retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph Nowoslawski**

Mailing Address 1211 Lakemont Road

City State Zip Code  
 Villanova PA 19085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 11 2013

**Transaction ID : SA17.28492**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Claudia Oliver**

Mailing Address 7240 thomas drive

City State Zip Code  
 Cincinnati OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

na

na

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 03 2013

**Transaction ID : SA17.25848**

Amount of Each Receipt this Period

25.00

na

Full Name (Last, First, Middle Initial)

**C. DAVID Michael ORORK**

Mailing Address 1100 LODI AVE

City State Zip Code  
 SOUTH LAKE TAHOE CA 96150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 25 2013

**Transaction ID : SA17.24959**

Amount of Each Receipt this Period

1000.00

retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

## **A. Lin R Ostlund**

Mailing Address 1100 State Route 508

City State Zip Code  
 Chehalis WA 98532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2013

Transaction ID : SA17.23824

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Lin R Ostlund**

Mailing Address 1100 State Route 508

City State Zip Code  
 Chehalis WA 98532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 23 / 2013

Transaction ID : SA17.24943

Amount of Each Receipt this Period

50.00

self

Full Name (Last, First, Middle Initial)

## **C. Lin R Ostlund**

Mailing Address 1100 State Route 508

City State Zip Code  
 Chehalis WA 98532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 23 / 2013

Transaction ID : SA17.25308

Amount of Each Receipt this Period

50.00

retired

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Lin R Ostlund**

Mailing Address 1100 State Route 508

City  
Chehalis

State Zip Code  
WA 98532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 25 / 2013

**Transaction ID : SA17.25743**

Amount of Each Receipt this Period

50.00

retired

Full Name (Last, First, Middle Initial)

**B. Denise Otott**

Mailing Address 50 Land Grant

City  
Irvine

State Zip Code  
CA 92618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2013

**Transaction ID : SA17.27717**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. max endel ots**

Mailing Address 2455 shirley rd

City  
de pere

State Zip Code  
WI 54115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2013

**Transaction ID : SA17.27126**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. max endel ots**

Mailing Address 2455 shirley rd

City  
de pere

State Zip Code  
WI 54115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2013

**Transaction ID : SA17.25815**

Amount of Each Receipt this Period

250.00

physician

Full Name (Last, First, Middle Initial)

**B. Dianne Broadway Padgett**

Mailing Address 10803 Burgoyne Road

City  
Houston

State Zip Code  
TX 77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Geophysical Consultant

Occupation

self - PADGETT EXPLORATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2013

**Transaction ID : SA17.21931**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Dianne Broadway Padgett**

Mailing Address 10803 Burgoyne Road

City  
Houston

State Zip Code  
TX 77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Geophysical Consultant

Occupation

self - PADGETT EXPLORATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 09 / 2013

**Transaction ID : SA17.26415**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Dale Pierce**

Mailing Address 8011 Bluebonnet

City State Zip Code  
Amarillo TX 79108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Firefighter

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2013

**Transaction ID : SA17.23217**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. WILLIAM DANIEL PINKERTON**

Mailing Address 1 BLUEBILL AVE #805

City State Zip Code  
NAPLES FL 34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2013

**Transaction ID : SA17.23215**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Kenneth James Potts**

Mailing Address 1857 N. 185th St

City State Zip Code  
Shoreline WA 98133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Corrections Officer/Retired Military

Occupation

King County

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2013

**Transaction ID : SA17.25407**

Amount of Each Receipt this Period

25.00

Corrections Officer/Retired Military

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2025.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Kenneth James Potts**

Mailing Address 1857 N. 185th St

City State Zip Code  
Shoreline WA 98133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Corrections Officer/Retired Military

Occupation  
King County

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 03 / 2013

**Transaction ID : SA17.25961**

Amount of Each Receipt this Period

250.00

Corrections Officer/Retired Military

Full Name (Last, First, Middle Initial)

**B. Elaine Susanne Price**

Mailing Address 2431 Aloma Ave #124

City State Zip Code  
Winter Park FL 32792

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
physician

Occupation  
condono global health systems, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

**Transaction ID : SA17.21186**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Elaine Susanne Price**

Mailing Address 2431 Aloma Ave #124

City State Zip Code  
Winter Park FL 32792

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
physician

Occupation  
condono global health systems, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 08 / 2013

**Transaction ID : SA17.23504**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Elaine Susanne Price**

Mailing Address 2431 Aloma Ave #124

City

Winter Park

State

FL

Zip Code

32792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

condono global health systems, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 09 / 2013

**Transaction ID : SA17.24567**

Amount of Each Receipt this Period

100.00

physician

Full Name (Last, First, Middle Initial)

**B. Elaine Susanne Price**

Mailing Address 2431 Aloma Ave #124

City

Winter Park

State

FL

Zip Code

32792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

condono global health systems, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

10 / 08 / 2013

**Transaction ID : SA17.25119**

Amount of Each Receipt this Period

100.00

physician

Full Name (Last, First, Middle Initial)

**C. Elaine Susanne Price**

Mailing Address 2431 Aloma Ave #124

City

Winter Park

State

FL

Zip Code

32792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

condono global health systems, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

11 / 08 / 2013

**Transaction ID : SA17.25419**

Amount of Each Receipt this Period

100.00

physician

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Elaine Susanne Price**

Mailing Address 2431 Aloma Ave #124

City State Zip Code  
 Winter Park FL 32792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

condono global health systems, LLC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA17.26036**

Amount of Each Receipt this Period

100.00

physician

Full Name (Last, First, Middle Initial)

**B. Gregory B. Primm**

Mailing Address 52 Midnight Ridge Drive

City State Zip Code  
 Las Vegas NV 89135-1680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

entrepreneur

Occupation

Battle Born Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

**Transaction ID : SA17.22499**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Clifford Ribner**

Mailing Address 320 South Boston, Ste. 1130

City State Zip Code  
 Tulsa OK 74103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lawyer

Occupation

Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 18 / 2013

**Transaction ID : SA17.21404**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Clifford Ribner**

Mailing Address 320 South Boston, Ste. 1130

City State Zip Code  
Tulsa OK 74103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Lawyer

Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2013

**Transaction ID : SA17.25817**

Amount of Each Receipt this Period

250.00

lawyer

Full Name (Last, First, Middle Initial)

**B. Chris Rivers**

Mailing Address POB 34100

City State Zip Code  
Pensacola FL 32507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

**Transaction ID : SA17.22724**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Juan R Santiago**

Mailing Address 9822 Frank Rd

City State Zip Code  
Germantown TN 38139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 28 / 2013

**Transaction ID : SA17.26201**

Amount of Each Receipt this Period

200.00

CIL Services Group

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 92

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Beverly and Elias Schonbrunn**

Mailing Address 844 S. Holt Ave., #1

City

Los Angeles

State

CA

Zip Code

90035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	10	/	2013

**Transaction ID : SA17.27543**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Luann Serafine, RN**

Mailing Address P.O. Box 766

City

Clements

State

CA

Zip Code

95227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RN; Trauma Nurse

Occupation

SJMC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	07	/	2013

**Transaction ID : SA17.23469**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Luann Serafine, RN**

Mailing Address P.O. Box 766

City

Clements

State

CA

Zip Code

95227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RN; Trauma Nurse

Occupation

SJMC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	09	/	2013

**Transaction ID : SA17.24565**

Amount of Each Receipt this Period

100.00

RN; Trauma Nurse

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Luann Serafine, RN**

Mailing Address P.O. Box 766

City State Zip Code  
 Clements CA 95227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RN; Trauma Nurse

Occupation

SJMC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 07 / 2013

**Transaction ID : SA17.25415**

Amount of Each Receipt this Period

100.00

RN; Trauma Nurse

Full Name (Last, First, Middle Initial)

**B. ADOLF SGAMBELLURI**

Mailing Address 9 LADERA CT

NIMITZHILL ESTATES

City State Zip Code  
 PITI GU 96915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARCOR RETIREE

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 03 / 2013

**Transaction ID : SA17.24104**

Amount of Each Receipt this Period

25.00

RETIREE

Full Name (Last, First, Middle Initial)

**C. ADOLF SGAMBELLURI**

Mailing Address 9 LADERA CT

NIMITZHILL ESTATES

City State Zip Code  
 PITI GU 96915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARCOR RETIREE

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 02 / 2013

**Transaction ID : SA17.25022**

Amount of Each Receipt this Period

25.00

RETIREE

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. ADOLF SGAMBELLURI**

Mailing Address 9 LADERA CT

NIMITZHILL ESTATES

City

PITI

State

GU

Zip Code

96915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARCOR RETIREE

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2013

**Transaction ID : SA17.25398**

Amount of Each Receipt this Period

25.00

RETIREE

Full Name (Last, First, Middle Initial)

**B. George P Shelton**

Mailing Address 4124 Kingsferry Dr

City

Arlington

State

TX

Zip Code

76016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 04 / 2013

**Transaction ID : SA17.24221**

Amount of Each Receipt this Period

500.00

VP Finance

Full Name (Last, First, Middle Initial)

**C. William Albert Silva**

Mailing Address 24303 Bear Mtn

City

San Antonio

State

TX

Zip Code

78258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CDR, MSC, USN (SEAL) Ret

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2013

**Transaction ID : SA17.25301**

Amount of Each Receipt this Period

100.00

CDR, MSC, USN (SEAL) Ret

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. William Albert Silva**

Mailing Address 24303 Bear Mtn

City

San Antonio

State

TX

Zip Code

78258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CDR, MSC, USN (SEAL) Ret

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 22 / 2013

**Transaction ID : SA17.25713**

Amount of Each Receipt this Period

100.00

CDR, MSC, USN (SEAL) Ret

Full Name (Last, First, Middle Initial)

**B. Phillips Waller Smith**

Mailing Address 7501 N. Ironwood Dr

City

Paradise valley

State

AZ

Zip Code

85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2013

**Transaction ID : SA17.21935**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. philip stahla**

Mailing Address p.o. box 3254

City

Gillette

State

WY

Zip Code

82717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eastside RV

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : SA17.25615**

Amount of Each Receipt this Period

50.00

sales

**SUBTOTAL** of Receipts This Page (optional)..... ►

1150.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Robert W Stowe**

Mailing Address 25 Walker Road

City

Beverly

State

MA

Zip Code

01915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 05 / 2013

**Transaction ID : SA17.25924**

Amount of Each Receipt this Period

100.00

Graphics Production

Full Name (Last, First, Middle Initial)

**B. Richard Sungaila**

Mailing Address 1827 Port Stanhope Pl

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 03 / 2013

**Transaction ID : SA17.24080**

Amount of Each Receipt this Period

25.00

Retired

Full Name (Last, First, Middle Initial)

**C. Walter Felix Taraska**

Mailing Address 85 Lexington Ave

City

Gloucester

State

MA

Zip Code

01930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 02 / 2013

**Transaction ID : SA17.25043**

Amount of Each Receipt this Period

100.00

Vice President

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Hal Tenney**

Mailing Address 9117 Turtle Creek Lane

City State Zip Code  
Fair Oaks CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Hi Tech Marketing and Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / 11 / 2013

**Transaction ID : SA17.25485**

Amount of Each Receipt this Period

25.00

High Tech Marketing and Sales

Full Name (Last, First, Middle Initial)

**B. Hal Tenney**

Mailing Address 9117 Turtle Creek Lane

City State Zip Code  
Fair Oaks CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Hi Tech Marketing and Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 22 / 2013

**Transaction ID : SA17.25704**

Amount of Each Receipt this Period

25.00

High Tech Marketing and Sales

Full Name (Last, First, Middle Initial)

**C. Susan Titta**

Mailing Address 7 Oakcrest Ct

City State Zip Code  
Holmdel NJ 07733-1162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 11 / 2013

**Transaction ID : SA17.28203**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Bob Touhey**

Mailing Address PO box 577

City  
Warrenton

State Zip Code  
VA 20188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRI, Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

**Transaction ID : SA17.21184**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Bob Touhey**

Mailing Address PO box 577

City  
Warrenton

State Zip Code  
VA 20188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRI, Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 07 / 2013

**Transaction ID : SA17.23455**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Bob Touhey**

Mailing Address PO box 577

City  
Warrenton

State Zip Code  
VA 20188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRI, Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 09 / 2013

**Transaction ID : SA17.24563**

Amount of Each Receipt this Period

40.00

managing director

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Bob Touhey**

Mailing Address PO box 577

City  
Warrenton

State Zip Code  
VA 20188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRI, Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2013

**Transaction ID : SA17.25109**

Amount of Each Receipt this Period

40.00

managing director

Full Name (Last, First, Middle Initial)

**B. Bob Touhey**

Mailing Address PO box 577

City  
Warrenton

State Zip Code  
VA 20188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRI, Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 07 / 2013

**Transaction ID : SA17.25412**

Amount of Each Receipt this Period

40.00

managing director

Full Name (Last, First, Middle Initial)

**C. Bob Touhey**

Mailing Address PO box 577

City  
Warrenton

State Zip Code  
VA 20188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRI, Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 09 / 2013

**Transaction ID : SA17.26033**

Amount of Each Receipt this Period

40.00

managing director

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. BOB TOWNE**

Mailing Address 91-1156 Paapaana St

City

Ewa Beach

State

HI

Zip Code

96706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

**Transaction ID : SA17.21625**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Carolyn Underwood**

Mailing Address 35 Bunny Court

City

Clyde

State

NC

Zip Code

28721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gofer

Occupation

GOD

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2013

**Transaction ID : SA17.21934**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Bermah LaVeana Vaughan**

Mailing Address 2406 Saint Remy Dr.

City

McKinney

State

TX

Zip Code

75070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

none

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 05 / 2013

**Transaction ID : SA17.24326**

Amount of Each Receipt this Period

50.00

Business Owner

**SUBTOTAL** of Receipts This Page (optional)..... ►

650.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Bermah LaVeana Vaughan**

Mailing Address 2406 Saint Remy Dr.

City State Zip Code  
 McKinney TX 75070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 07 / 2013

**Transaction ID : SA17.25108**

Amount of Each Receipt this Period

50.00

Business Owner

Full Name (Last, First, Middle Initial)

**B. Bermah LaVeana Vaughan**

Mailing Address 2406 Saint Remy Dr.

City State Zip Code  
 McKinney TX 75070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 05 / 2013

**Transaction ID : SA17.25406**

Amount of Each Receipt this Period

50.00

Business Owner

Full Name (Last, First, Middle Initial)

**C. John Wasserburger**

Mailing Address 115 Cedar Circle

City State Zip Code  
 Poynette WI 53955

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA17.26548**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. James Robert Watkins**

Mailing Address 510 Forest Loop

City

Mandeville

State

LA

Zip Code

70471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cal Dive Int'l

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 09 / 2013

**Transaction ID : SA17.24562**

Amount of Each Receipt this Period

250.00

Saturation Dive Supt./ Supv.

Full Name (Last, First, Middle Initial)

**B. James Robert Watkins**

Mailing Address 510 Forest Loop

City

Mandeville

State

LA

Zip Code

70471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cal Dive Int'l

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 05 / 2013

**Transaction ID : SA17.25944**

Amount of Each Receipt this Period

250.00

Dive Supt.

Full Name (Last, First, Middle Initial)

**C. William Thomas Westmoreland**

Mailing Address 114 Cinnamon Fern Lane

City

Banner Elk

State

NC

Zip Code

28604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 25 / 2013

**Transaction ID : SA17.25755**

Amount of Each Receipt this Period

50.00

MD

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. John E Wheeler**

Mailing Address PO Box 1256

City

State

Zip Code

Anchor Point

AK

99556-1256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 11 / 2013

**Transaction ID : SA17.24715**

Amount of Each Receipt this Period

100.00

Crane Operator

Full Name (Last, First, Middle Initial)

**B. Rush Youngberg**

Mailing Address 9381 NE North Shore Rd

City

State

Zip Code

Belfair

WA

98528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 11 / 2013

**Transaction ID : SA17.28440**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Kathryn Wood Zenthoefer**

Mailing Address 24 Stonebriar Way

City

State

Zip Code

Frisco

TX

75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

physician

Kathryn J. Wood, M.D., P.A.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 29 / 2013

**Transaction ID : SA17.23313**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 OF 92

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Kathryn Wood Zenthoefer**

Mailing Address 24 Stonebriar Way

City State Zip Code  
 Frisco TX 75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

Kathryn J. Wood, M.D., P.A.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 / 27 / 2013

Transaction ID : SA17.23924

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kathryn Wood Zenthoefer**

Mailing Address 24 Stonebriar Way

City State Zip Code  
 Frisco TX 75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

Kathryn J. Wood, M.D., P.A.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 27 / 2013

Transaction ID : SA17.24973

Amount of Each Receipt this Period

100.00

Kathryn J. Wood, M.D., P.A.

Full Name (Last, First, Middle Initial)

**C. Kathryn Wood Zenthoefer**

Mailing Address 24 Stonebriar Way

City State Zip Code  
 Frisco TX 75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

Kathryn J. Wood, M.D., P.A.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 28 / 2013

Transaction ID : SA17.25320

Amount of Each Receipt this Period

100.00

physician

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 92  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Kathryn Wood Zenthoefer**

Mailing Address 24 Stonebriar Way

City State Zip Code  
Frisco TX 75034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

physician

Occupation

Kathryn J. Wood, M.D., P.A.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 27 / 2013

**Transaction ID : SA17.25792**

Amount of Each Receipt this Period

100.00

physician

Full Name (Last, First, Middle Initial)

**B. margaret ziegler**

Mailing Address 930 schloemer dr

City State Zip Code  
west bend WI 53095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 10 / 2013

**Transaction ID : SA17.26842**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

32956.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 92

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 100 North Tryon St.

City Charlotte      State NC      Zip Code 28255

Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 04 / 2013
**Transaction ID : SB21B.29225**

Amount of Each Disbursement this Period

159.75

Full Name (Last, First, Middle Initial)

**B. Kenneth James Benway**

Mailing Address 8 Martin Way

City Whispering Pines      State NC      Zip Code 28327

Purpose of Disbursement  
Travel expense

002

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 19 / 2013
**Transaction ID : SB21B.29232**

Amount of Each Disbursement this Period

349.44

Full Name (Last, First, Middle Initial)

**C. Dick Brauer**

Mailing Address 24 Country Club Rd

City Shalimar      State FL      Zip Code 32579

Purpose of Disbursement  
First Coast Tea Party-travel

002

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2013
**Transaction ID : SB21B.29230**

Amount of Each Disbursement this Period

337.73

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

846.92

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 92

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.

City San Francisco    State CA    Zip Code 94105

Purpose of Disbursement  
Merchant processing fees

003

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2013
**Transaction ID : SB21B.29265**

Amount of Each Disbursement this Period

5205.44

Full Name (Last, First, Middle Initial)

**B. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington    State DC    Zip Code 20003

Purpose of Disbursement  
Marketing services

004

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 11 / 2013
**Transaction ID : SB21B.29254**

Amount of Each Disbursement this Period

6369.32

Full Name (Last, First, Middle Initial)

**C. Transaxt**

Mailing Address 190 Monroe Street

City Grand Rapids    State MI    Zip Code 49503

Purpose of Disbursement  
Merchant processing fees

003

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2013
**Transaction ID : SB21B.29264**

Amount of Each Disbursement this Period

2469.98

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14044.74

14891.66

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Walter Hetzler**

Mailing Address 5527 Topaz St. SE

City	State	Zip Code
Lacey	WA	98513

Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2013

**Transaction ID : SB28A.30086**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. Walter Hetzler**

Mailing Address 5527 Topaz St. SE

City	State	Zip Code
Lacey	WA	98513

Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2013

**Transaction ID : SB28A.30087**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Walter Hetzler**

Mailing Address 5527 Topaz St. SE

City	State	Zip Code
Lacey	WA	98513

Purpose of Disbursement  
Refund of contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2013

**Transaction ID : SB28A.30088**

Amount of Each Disbursement this Period

250.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00
--------

750.00
--------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 100 North Tryon St.

City	State	Zip Code
Charlotte	NC	28255

Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

**Transaction ID : SB29.29193**

Amount of Each Disbursement this Period

25.33
-------

Full Name (Last, First, Middle Initial)

**B. Kenneth James Benway**

Mailing Address 8 Martin Way

City	State	Zip Code
Whispering Pines	NC	28327

Purpose of Disbursement  
Carey acct; travel expense reimbursement

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2013

**Transaction ID : SB29.29229**

Amount of Each Disbursement this Period

213.00
--------

Full Name (Last, First, Middle Initial)

**C. Kenneth James Benway**

Mailing Address 8 Martin Way

City	State	Zip Code
Whispering Pines	NC	28327

Purpose of Disbursement  
Carey acct-reimbursement

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2013

**Transaction ID : SB29.29219**

Amount of Each Disbursement this Period

50.00
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

288.33
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Kenneth James Benway**

Mailing Address 8 Martin Way

City	State	Zip Code
Whispering Pines	NC	28327

Purpose of Disbursement  
Carey acctnt-meeting payments

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2013

**Transaction ID : SB29.29223**

Amount of Each Disbursement this Period

114.38
--------

Full Name (Last, First, Middle Initial)

**B. Dick Brauer**

Mailing Address 24 Country Club Rd

City	State	Zip Code
Shalimar	FL	32579

Purpose of Disbursement  
Carey acctnt-travel expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2013

**Transaction ID : SB29.29235**

Amount of Each Disbursement this Period

694.11
--------

Full Name (Last, First, Middle Initial)

**C. Dick Brauer**

Mailing Address 24 Country Club Rd

City	State	Zip Code
Shalimar	FL	32579

Purpose of Disbursement  
Carey acctnt; travel expense reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2013

**Transaction ID : SB29.29226**

Amount of Each Disbursement this Period

159.84
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

968.33

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Dick Brauer**

Mailing Address 24 Country Club Rd

City	State	Zip Code
Shalimar	FL	32579

Purpose of Disbursement  
Carey acct; travel expense reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2013

**Transaction ID : SB29.29231**

Amount of Each Disbursement this Period

337.73
--------

Full Name (Last, First, Middle Initial)

**B. Dick Brauer**

Mailing Address 24 Country Club Rd

City	State	Zip Code
Shalimar	FL	32579

Purpose of Disbursement  
Carey acct-meeting payments

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2013

**Transaction ID : SB29.29241**

Amount of Each Disbursement this Period

1460.26
---------

Full Name (Last, First, Middle Initial)

**C. Caddis Advertising, LLC**

Mailing Address 1975 North Fence Line Court

City	State	Zip Code
Prescott Valley	AZ	86314

Purpose of Disbursement  
Carey acct-video production

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2013

**Transaction ID : SB29.29236**

Amount of Each Disbursement this Period

800.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2597.99
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. CBS Corp.**

Mailing Address 51 West 52nd Street

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement  
Carey account; Billboard advertising fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2013

**Transaction ID : SB29.29253**

Amount of Each Disbursement this Period

6100.00
---------

Full Name (Last, First, Middle Initial)

**B. DB Capitol Strategies PLLC**Mailing Address 203 South Union St  
Ste 300

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Carey acct-legal and compliance fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2013

**Transaction ID : SB29.29244**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. DB Capitol Strategies PLLC**Mailing Address 203 South Union St  
Ste 300

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Carey acct-legal and compliance fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2013

**Transaction ID : SB29.29245**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10100.00
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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29	<input type="checkbox"/>	30b

## Special Operations Speaks PAC - SOS PAC

Category/  
Type

33.40

Category/  
Type

2000.00

MM / DD / YYYY

Category/  
Type

210.00

2243.40

2243.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Linda Eddy**

Mailing Address P.O. BOX 171

City	State	Zip Code
Webster City	IA	50595

Purpose of Disbursement  
Carey acct; travel expense reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2013

**Transaction ID : SB29.29220**

Amount of Each Disbursement this Period

70.00
-------

Full Name (Last, First, Middle Initial)

**B. William Finlay**Mailing Address 1930 S. Ridgewood Ave  
#18

City	State	Zip Code
South Daytona	FL	32119

Purpose of Disbursement  
Carey acct-meeting payments

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2013

**Transaction ID : SB29.29238**

Amount of Each Disbursement this Period

945.86
--------

Full Name (Last, First, Middle Initial)

**C. Glengary, Inc.**Mailing Address 3303 East Baseline Road Bld. 4  
Bld 4 Ste 207

City	State	Zip Code
Gilbert	AZ	85234

Purpose of Disbursement  
Carey acct-list rental

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2013

**Transaction ID : SB29.29243**

Amount of Each Disbursement this Period

1840.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2855.86
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. InfoCision Management Corp.**

Mailing Address 325 Springside Drive

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement  
Carey acct-telemarketing services

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		04		2013

**Transaction ID : SB29.29186**

Amount of Each Disbursement this Period

14.33
-------

Full Name (Last, First, Middle Initial)

**B. InfoCision Management Corp.**

Mailing Address 325 Springside Drive

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement  
Carey acct-telemarketing services

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2013

**Transaction ID : SB29.29183**

Amount of Each Disbursement this Period

8.11
------

Full Name (Last, First, Middle Initial)

**C. InfoCision Management Corp.**

Mailing Address 325 Springside Drive

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement  
Carey account; Benghazi radio advertisement

004

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2013

**Transaction ID : SB29.29184**

Amount of Each Disbursement this Period

8.55
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.99
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. InfoCision Management Corp.**

Mailing Address 325 Springside Drive

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement  
Carey acct-telemarketing services

003

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2013

**Transaction ID : SB29.29239**

Amount of Each Disbursement this Period

1038.73
---------

Full Name (Last, First, Middle Initial)

**B. InfoCision Management Corp.**

Mailing Address 325 Springside Drive

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement  
Telemarketing services

003

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2013

**Transaction ID : SB29.29222**

Amount of Each Disbursement this Period

103.66
--------

Full Name (Last, First, Middle Initial)

**C. InfoCision Management Corp.**

Mailing Address 325 Springside Drive

City	State	Zip Code
Akron	OH	44333

Purpose of Disbursement  
Carey acct-telemarketing services

003

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2013

**Transaction ID : SB29.29221**

Amount of Each Disbursement this Period

72.85
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1215.24

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. James R. Whelan Agency LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2013

Mailing Address 444 Bunker Rd  
Suite 207

City West Palm Beach State FL Zip Code 33405

Purpose of Disbursement  
Carey acct-domestic wire tfr

004

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB29.29251**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**B. PCI Payment Solutions**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2013

Mailing Address 902 Chinquapin Rd.

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB29.29211**

Amount of Each Disbursement this Period

37.90

Full Name (Last, First, Middle Initial)

**C. PCI Payment Solutions**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2013

Mailing Address 902 Chinquapin Rd.

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Carey acct-merchant fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB29.29185**

Amount of Each Disbursement this Period

12.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6049.90



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 81 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. PCI Payment Solutions**

Mailing Address 902 Chinquapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2013

**Transaction ID : SB29.29212**

Amount of Each Disbursement this Period

37.90
-------

Full Name (Last, First, Middle Initial)

**B. PCI Payment Solutions**

Mailing Address 902 Chinquapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fee

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2013

**Transaction ID : SB29.29224**

Amount of Each Disbursement this Period

127.00
--------

Full Name (Last, First, Middle Initial)

**C. PCI Payment Solutions**

Mailing Address 902 Chinquapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2013

**Transaction ID : SB29.29213**

Amount of Each Disbursement this Period

37.90
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

202.80
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. PCI Payment Solutions**

Mailing Address 902 Chinquapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fee

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2013

**Transaction ID : SB29.29187**

Amount of Each Disbursement this Period

14.79
-------

Full Name (Last, First, Middle Initial)

**B. PCI Payment Solutions**

Mailing Address 902 Chinquapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2013

**Transaction ID : SB29.29214**

Amount of Each Disbursement this Period

37.90
-------

Full Name (Last, First, Middle Initial)

**C. PCI Payment Solutions**

Mailing Address 902 Chinquapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fee

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

**Transaction ID : SB29.29181**

Amount of Each Disbursement this Period

7.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.69
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. PCI Payment Solutions**

Mailing Address 902 Chinguapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2013

**Transaction ID : SB29.29215**

Amount of Each Disbursement this Period

37.90
-------

Full Name (Last, First, Middle Initial)

**B. PCI Payment Solutions**

Mailing Address 902 Chinguapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fee

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2013

**Transaction ID : SB29.29180**

Amount of Each Disbursement this Period

5.00
------

Full Name (Last, First, Middle Initial)

**C. PCI Payment Solutions**

Mailing Address 902 Chinguapin Rd.

City	State	Zip Code
McLean	VA	22102

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2013

**Transaction ID : SB29.29216**

Amount of Each Disbursement this Period

37.90
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.80
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2013

**Transaction ID : SB29.29201**

Amount of Each Disbursement this Period

29.00
-------

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2013

**Transaction ID : SB29.29190**

Amount of Each Disbursement this Period

25.00
-------

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2013

**Transaction ID : SB29.29202**

Amount of Each Disbursement this Period

29.00
-------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

83.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2013

**Transaction ID : SB29.29191**

Amount of Each Disbursement this Period

25.00
-------

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2013

**Transaction ID : SB29.29192**

Amount of Each Disbursement this Period

25.00
-------

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

**Transaction ID : SB29.29203**

Amount of Each Disbursement this Period

29.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

79.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

**Transaction ID : SB29.29204**

Amount of Each Disbursement this Period

29.00
-------

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

**Transaction ID : SB29.29205**

Amount of Each Disbursement this Period

29.00
-------

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

**Transaction ID : SB29.29206**

Amount of Each Disbursement this Period

29.00
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2013

**Transaction ID : SB29.29207**

Amount of Each Disbursement this Period

29.00
-------

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc.**

Mailing Address 144 2nd St.

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Carey acct-merchant fees

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2013

**Transaction ID : SB29.29208**

Amount of Each Disbursement this Period

29.00
-------

Full Name (Last, First, Middle Initial)

**C. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Rooms and banner

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2013

**Transaction ID : SB29.29248**

Amount of Each Disbursement this Period

2785.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2843.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey acct-graphic design, marketing services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2013

**Transaction ID : SB29.29249**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey acct-graphic design, marketing services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2013

**Transaction ID : SB29.29255**

Amount of Each Disbursement this Period

7000.00
---------

Full Name (Last, First, Middle Initial)

**C. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey acct-graphic design, marketing services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2013

**Transaction ID : SB29.29259**

Amount of Each Disbursement this Period

12000.00
----------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

24000.00
----------

**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Graphic design

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2013

**Transaction ID : SB29.29258**

Amount of Each Disbursement this Period

12000.00
----------

Full Name (Last, First, Middle Initial)

**B. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey acct-graphic design, marketing services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2013

**Transaction ID : SB29.29260**

Amount of Each Disbursement this Period

20410.98
----------

Full Name (Last, First, Middle Initial)

**C. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey acct-old invoices

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2013

**Transaction ID : SB29.29256**

Amount of Each Disbursement this Period

7950.90
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40361.88
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey acct-graphic design, marketing services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2013

**Transaction ID : SB29.29261**

Amount of Each Disbursement this Period

24828.38
----------

Full Name (Last, First, Middle Initial)

**B. Political Media, Inc.**Mailing Address 406 First Se. SE  
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Carey acct-graphic design, marketing services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2013

**Transaction ID : SB29.29257**

Amount of Each Disbursement this Period

10177.25
----------

Full Name (Last, First, Middle Initial)

**C. Rapid Response Television**Mailing Address 4850 Wright Rd.  
STE 168

City Stafford State TX Zip Code 77477

Purpose of Disbursement  
Carey acct-August DR TV Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2013

**Transaction ID : SB29.29250**

Amount of Each Disbursement this Period

5000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40005.63
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. Revive America LLC**

Mailing Address 415 Paso Corto Dr.

City	State	Zip Code
Kearneysville	WV	25430

Purpose of Disbursement  
Carey acct-list rental

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2013

**Transaction ID : SB29.29247**

Amount of Each Disbursement this Period

2510.00
---------

Full Name (Last, First, Middle Initial)

**B. Ben Smith**

Mailing Address 526 Bedford Forest Dr.

City	State	Zip Code
Wilmington	NC	28412

Purpose of Disbursement  
Carey acct-mileage reimbursement

002

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2013

**Transaction ID : SB29.29233**

Amount of Each Disbursement this Period

401.50
--------

Full Name (Last, First, Middle Initial)

**C. Joseph S. Stringham**

Mailing Address 6853 County Road 17

City	State	Zip Code
Woodville	AL	35776-6715

Purpose of Disbursement  
Carey acct-meeting payments

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		23		2013

**Transaction ID : SB29.29240**

Amount of Each Disbursement this Period

1129.66
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4041.16

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Special Operations Speaks PAC - SOS PAC**

Full Name (Last, First, Middle Initial)

**A. John Tobin**

Mailing Address 7411 Pine Lake Lane

City	State	Zip Code
Mint Hill	NC	28227

Purpose of Disbursement  
Carey acctnt-meeting payments

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2013

**Transaction ID : SB29.29234**

Amount of Each Disbursement this Period

463.52
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

463.52

138657.52